



**Sabre • FWI**

### *Load Verification Inspection*

DATE: Mar 2019

BOL# 418762

Job# 418762

Truck#

Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: John J. Magin

Forklift Driver (if Needed):

**Sabre Industries**

418762

**BILL OF LADING - Short Form. Not Negotiable**

Name of Carrier: <b>Customer Pickup</b>	Carrier Number: <b>MSF-309-163</b>	BOL No. <b>309163</b>	
Carrier Code: <b>CPLX</b>	Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>	
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:  <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party	
Street:			
City/State: <b>Denville CA 05865</b>			
Delivery/Special Instructions: <b>Charlene McLeod 209-192-1669</b>			
Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	<b>418762 Load# 0</b>	<b>17,228</b>	<b>0</b>
0			
1	<b>418762-1-1 Customer PO: 3501176797 PO Ln: 5 418762-3509-B</b>	<b>824</b>	
1	<b>418762-1-2 Customer PO: 3501176797 PO Ln: 2 418762-3509-B</b>	<b>824</b>	
1	<b>418762-1-7 Customer PO: 3501176797 PO Ln: 5 418762-3510-B</b>	<b>824</b>	
1	<b>118762-1-8 Customer PO: 3501176797 PO Ln: 5 118762-3509-B</b>	<b>824</b>	
1	<b>118762-2-1 Customer PO: 3501176797 PO Ln: 1 118762-3510-T</b>	<b>1,144</b>	
1	<b>118762-3-1 Customer PO: 3501176797 PO Ln: 6 118762-3510-T</b>	<b>1,144</b>	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR

DRIVER

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE: The agreed or declared value of the property is specifically stated by the shipper to be \$ 100,000.00

SHIPPER/CONSIGNOR

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed V. Maras Alter  
DriverTruck Number H-511Witnessed TXCHER MARIE  
Name of Trucking CompanyDate 1-4-19 Time \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_

Crew Foreman

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Witnessed \_\_\_\_\_ Date \_\_\_\_\_ of 27

Driver



**BILL OF LADING - Short Form. Not Negotiable**

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309163</b>
Carrier Code: <b>CPUX</b>	Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:  <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:		
City/State: <b>Orrville CA 95965</b>	Zip Code:	
Delivery/Special Instructions: <b>Charlene McLoed 209-497-1669</b>		

**DRIVER CERTIFICATION.** Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

**SHIPPER/CONSIGNOR** \_\_\_\_\_ **DRIVER** \_\_\_\_\_

**SECTION 7 - NON-RE COURSE ON CON SIGNOR.** If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all

Noisy if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_ Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

100,000.00

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged. The carrier has also visually inspected the cargo. Compensation is not available for damage or shortages.

Signed \_\_\_\_\_ Driver \_\_\_\_\_ Truck Number \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Name of Trucking Company

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dentied or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_



**BILL OF LADING - Short Form. Not Negotiable**

**DRIVER CERTIFICATION.** Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

**SHIPPER/CONSIGNOR** \_\_\_\_\_ **DRIVER** \_\_\_\_\_

**SECTION 7 - NON-RECOURSE ON CONSIGNOR.** If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

**SHIPPER/CONSIGNOR**

Notify if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_ Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

100.000,00

WIKIPEDIA OF CULTURALLY SENSITIVE PEDIATRIC NURSING | Page 10

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged. I am also witness the Sales Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Date \_\_\_\_\_ Truck Number \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Name of Trucking Company

Sabre Representative

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman



## BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Custonner Pickup</b>	Carrier Number:	BOL No. <b>MSF-309163</b>	
Carrier Code: <b>CPUX</b>	Pick-Up Date and Time: <b>01/04/19</b>	Delv. Date and Time: <b>01/07/19 00:00</b>	
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party	
Street:			
City/State: <b>Ornville CA 95965</b>			
Delivery/Special Instructions: <b>Charlene McLoed 209-492-1669</b>			
Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	<b>Please deliver to the following location:</b>		
	<b>2002 South 6th Ave. Ornville, CA 95965</b>		
	<b>72 Hour Advanced Notice by driver.</b>		
DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.			
This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.			
SHIPPER/CONSIGNOR _____		DRIVER _____	
SECTION 7 - NON-REOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.			
SHIPPER/CONSIGNOR _____			

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ 100,000.00.

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman \_\_\_\_\_

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Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver \_\_\_\_\_  
of 27

"THE NEW"

SABRE-FWT

JOB# 418762

BOL# 309163

SABRE-FWT CORPORATION'S FREIGHT IS VERY TIME SENSITIVE

1. I UNDERSTAND THE HOURS NEEDED TO REACH THE DESTINATION AND I HAVE THE AVAILABLE DRIVING HOURS NEEDED TO COMPLETE THE DELIVERY IN A TIMELY MANNER.
2. I CAN COVER THE MILES NEEDED TO DRIVE AND BE ON TIME PER APPT DAY AND TIME, (LISTED ON BILL OF LADING) AND DELIVER ON TIME ACCORDING TO ACTUAL LOAD TIME LEAVING SABRE FACILITIES.
3. IN THE EVENT OF ANY SITUATION OR CIRCUMSTANCE WHICH MIGHT CAUSE DELAY IN DELIVERY, I AGREE TO GIVE A 24-48 HOUR NOTICE, OR AS MUCH NOTICE AS POSSIBLE, OF SUCH POSSIBLE DELAY TO SABRE-FWT COMMUNICATIONS CORPORATION BY CALLING SABRE AT 866-254-3707 AND INFORM SABRE OF THE DELAY.

DRIVER(S) PLEASE GO OVER ITEMS LISTED ABOVE AND VERIFY ALL ARE IN ORDER TO MAKE SURE YOU UNDERSTAND LOAD SEVERITY AND YOU CAN DELIVER LOAD ON TIME. IF ANSWER IS (NO) TO ANY OF THE ABOVE YOU NEED TO CALL YOUR DISPATCH PRIOR TO LOADING AND/OR MOVING THE LOAD.

IF YOU DO NOT NOTIFY AND/OR DO NOT MAKE ON TIME DELIVERY DUE TO DRIVER NEGLIGENCE, DAMAGES LISTED BELOW COULD BE APPLIED AND CHARGES/DETENTION WILL BE ASSESSED TO YOUR COMPANY.

1. BACK CHARGES FOR CRANE DOWNTIME.
2. BACK CHARGES FOR CREW DOWNTIME.

ARRIER(S) NOT LIABLE FOR DELAY WHEN SUCH DELAY IS CAUSED BY ACT OF GOD, WORK STOPPAGE, IMPASSABLE HIGHWAYS, BRIDGES, WAR, REBELLION, RIOT OR THE ACT OF PUBLIC AUTHORITY.

REQUIREMENTS

By signing this document the driver verifies they have all the personal protective equipment (PPE) required (i.e. hard hat, ANSI-approved safety glasses/prescription safety glasses with side shields, high-visibility reflective vest, work gloves appropriate for the potential hazards {Jersey gloves are not permitted to be worn as the only means of protection}, and protective toe footwear that meet the safety-toe specifications as ASTM F2413-05 with compression rating of C75). When required hearing protection devices and Fire Retardant clothing.

DRIVER SIGNATURE: James Allen



### Miscellaneous Shipment Authorization

Pack ID 309163	Customer PG&E	Site State CA	Site Name PO 3501176797 WPES
	Requested By cgarcla		Site Country
Ship Date 1/4/2019	Arrive Date/Time 01/07/2019 12:00 AM	Model	Height 0.00
Shipment Type 4. CPU	Material To Ship Utility	Est Truck Loads	Ship From Bossier City
Cosignee PG&E	Contact Name\Phone\Cell Charlene McLoed 209-492-1669	Ship Address Oroville, CA 95965	

**Directions**

SO# 418762, PG&amp;E, PO# 3501176797

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

Line	Qty	Part Number	Description	Weight
Order Number: 418762				
2	1	418762-3509-B		824.00
3	1	418762-3526-B		837.00
4	1	418762-3526-B		837.00
5	1	418762-3513-B		1,268.00
6	1	418762-3509-B		824.00
7	1	418762-3611-B		892.00
8	1	418762-3526-B		837.00
9	1	418762-3511-B		892.00
10	1	418762-3509-B		824.00
11	1	418762-3513-B		1,268.00
12	1	418762-3509-B		824.00
13	1	418762-3539-B		1,387.00
14	1	418762-3510-T		1,141.00
15	1	418762-3510-T		1,141.00
16	1	418762-3510-T		1,141.00
17	1	418762-3525-T		1,010.00
18	1	418762-3536-T		1,281.00
Approved By: kharper				Total Weight: 17,228.00

MSE-309163

Customer Pickup

01/04/19

01/07/19 00:00

CPUX

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

17,228 0

418762 Load#: 0

0			824
1	418762-1-11	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824
1	418762-1-2	Customer PO: 3501176797 PO Ln: 2 418762-3509-B	824
1	418762-1-7	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824
1	418762-1-8	Customer PO: 3501176797 PO Ln: 5 418762-3509-B	824
1	418762-2-1	Customer PO: 3501176797 PO Ln: 4 418762-3510-T	1,141
1	418762-3-1	Customer PO: 3501176797 PO Ln: 8 418762-3510-T	1,141

100,000.00

Customer Pickup

MSE-309163

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418762-3-2	Customer PO: 3501176797 PO Ln: 8 418762-3510-T	1,141
1	418762-2-1	Customer PO: 3501176797 PO Ln: 4 418762-3511-B	892
1	418762-3-1	Customer PO: 3501176797 PO Ln: 8 418762-3513-B	1,268
1	418762-3-2	Customer PO: 3501176797 PO Ln: 8 418762-3513-B	1,268
1	418762-4-6	Customer PO: 3501176797 PO Ln: 7 418762-3525-T	1,010
1	418762-4-2	Customer PO: 3501176797 PO Ln: 1 418762-3526-B	837
1	418762-4-3	Customer PO: 3501176797 PO Ln: 1 418762-3526-B	837
1	418762-4-9	Customer PO: 3501176797 PO Ln: 7 418762-3526-B	837

100,000.00

Customer Pickup		MSE-309163
CPUX	01/04/19	01/07/19 00:00
PG&E	Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111	X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418762-6-1	Customer PO: 3501176797 PO Ln: 3 418762-3536-T	1,281
1	418762-6-1	Customer PO: 3501176797 PO Ln: 3 418762-3539-B	1,387
1	418762-5-1	Customer PO: 3501176797 PO Ln: 6 418762-3611-B	892

100,000.00

MSE-309163  
Customer Pickup 01/07/19 00:00  
01/04/19  
CPUX  
PG&E Bossier City, LA X  
5031 Hazel Jones Road  
Bossier City, LA 71111

Oroville CA 95965

Charlene McLoed  
209-492-1669

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

100,000.00



## Load Verification Inspection

DATE:	BOL#	Job#	Truck#	Check Box
		418762		

- (1) Verify information on ID tag matches information on the section.

(2) Verify all welds on the section are completed.

(3) Verify there is no outer damage to the poles.

(4) Check quality of surface finish.

(5) Verify there are no loose items within the section.

(6) Verify protective caps are in place where required.

(7) Verify there is proper spacing and protection to prevent shipping damage.

(8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.

(9) Purple flag the trailer once the load has been verified as correct.

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector:

Forklift Driver (if Needed):

# Sabre - FWT

3001143

## Load Verification Inspection

DATE: \_\_\_\_\_

BOL# 3001143

Job# 418762

Truck# \_\_\_\_\_

Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

12-male section

5-1 4-9 4-2  
1-2 5-1 1-7  
3-2 2-1 3-1  
1-8 1-11 4-3

Comments:

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NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: Anthony M. Mays

Forklift Driver (if Needed):

**Sabre Industries**

## BILL OF LADING - Short Form. Not Negotiable

L118873

pg 1

309179

Name of Carrier: <b>CH Robinson</b>	Carrier Number:	BOL No. <b>L1</b>
Carrier Code: <b>CPIXP</b>	Pick-Up Date and Time: <b>12/26</b>	Delv. Date and Time: <b>12/18</b>
TO Consignee: <b>DBI E</b>	From Shipper:	<input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street: <b>2593 South 5th Ave</b>		
City/State: <b>PROVINCIAL CA</b>	Zip Code: <b>95905</b>	
Delivery/Special Instructions: <b>Cheriele McLeod 209-492-1689</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	<b>L18873 35011707 92</b>		
1	1-9 C1 US		
1	1-3 C1 US		
1	1-2 C1 US		
1	3-1 H1 US		
1	3-6 H1 US		
1	1-8 C1 US		
1	3-10 H1 US		
1	1-4 C1 US		
1	1-7 C1 US		
1	3-9 H1 US		
1	1-4 C1 US		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

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SHIPPER/CONSIGNOR

DRIVER

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_.

SHIPPER/CONSIGNOR 100

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed

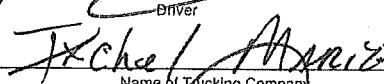


Truck Number

L1 723

Driver

Witnessed



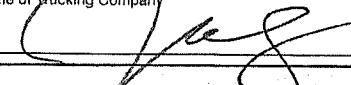
Date

12/31/18

Time

Name of Trucking Company

Sabre Representative



**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed

Crew Foreman

Company

Witnessed

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 14

Driver

of 27

**Sabre Industries™**

418823

**BILL OF LADING - Short Form. Not Negotiable**

P G 2

Name of Carrier:	Carrier Number:	BOL No.
Carrier Code:	Pick-Up Date and Time:	Delv. Date and Time:
TO Consignee:	From Shipper:	Send All Freight Bills To:
Street:		<input type="checkbox"/> Shipper <input type="checkbox"/> Consignee <input type="checkbox"/> Third Party
City/State:	Zip Code:	
Delivery/Special Instructions:		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
	418823 D0 B 3501176792		
1	3-5 H145 B		
1	2-1 C175 B		
1	3-8 H145 B		
1	3-2 H145 B		
1	1-1 C145 B		
	1 C175 B		
	9 C145 B		
	7 H145 B		

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_

DRIVER X

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the Consignee/Third party Bill to depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_ Telephone No. \_\_\_\_\_ After Hrs. No. \_\_\_\_\_

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_.

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck, and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Driver \_\_\_\_\_

Truck Number \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Name of Trucking Company \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_

Crew Foreman

# Sabre - FWT

## Load Verification Inspection

DATE:

BOL#

Job#

823

Truck#

Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

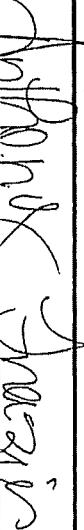
16 male sections  
2 - C1

Comments:

---

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector:



Forklift Driver (if Needed):



## Load Verification Inspection

DATE: 12-19-18 BOL#  Job# 418767 Truck#  Check Box

- (1) Verify information on ID tag matches information on the section.
- (2) Verify all welds on the section are completed.
- (3) Verify there is no outer damage to the poles.
- (4) Check quality of surface finish.
- (5) Verify there are no loose items within the section.
- (6) Verify protective caps are in place where required.
- (7) Verify there is proper spacing and protection to prevent shipping damage.
- (8) Verify all hardware is palletize and stretch wrapped, with job number and ship date.
- (9) Purple flag the trailer once the load has been verified as correct.

2.3 Female  
Sections

Comments:

NOTE: STOP SHIPMENT IF A PROBLEM IS FOUND AND NOTIFY MANAGEMENT.

Inspector: Anthony J. Macias

Forklift Driver (if Needed):

**Sabre Industries**™

418823

**BILL OF LADING - Short Form. Not Negotiable**

**DRIVER CERTIFICATION.** Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

**SHIPPER/CONSIGNOR**

DRIVER

**SECTION 7 - NON-RECOURSE ON CONSIGNOR.** If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

**SHIPPER/CONSIGNOR**

Notify if problem arises in route or at delivery: Name \_\_\_\_\_ Transportation Manager \_\_\_\_\_

Telephone No.

Aflos Hrs. No.

<sup>1</sup> See also the discussion of the relationship between the two in the Introduction.

AMOUNT OF LIABILITY FOR FREIGHT LOSS OR DAMAGE The agreed or declared value of

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged. I am also enclosing the following and the Photo Camera pictures. Representative named below inspected the car(s) for damage or shortages.

Signed 

**Truck Number**

739

Witnessed American Hatchet

Date 1/11/9 Time

Sabre Representative

**POST-SHIPPING INSPECTION.** I have visually inspected damaged in any way beyond the form, fit or function of that piece?

the material on this truck prior to their removal and have found that they are not warped, be-

Signed 

Company \_\_\_\_\_



# BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick Up Date and Time: <b>01/07/19 00:00</b>	Delv. Date and Time:
TO Consignee: <b>PGE</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:
Street:		<input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
City/State: <b>Orville CA 95965</b>	Zip Code:	
Delivery/Special Instructions: <b>Charlene McLeod 209-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418823-1-7 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	418823-1-8 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	418823-1-9 Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025	
1	118823-1-5 Customer PO: 3501176792 PO Ln: 1 118823-3509-B	821	
1	418823-2-1 Customer PO: 3501176792 PO Ln: 1 418823-3510-T	1,141	
1	418823-3-1 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-10 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-2 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SIGNER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RECOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SIGNER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. 100,000.00 After Hrs. No. 100,000.00

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_.

SIGNER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver \_\_\_\_\_

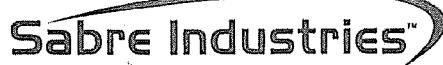
Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman \_\_\_\_\_

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 19  
Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver \_\_\_\_\_



# BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick Up Date and Time: <b>01/07/19 00:00</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PS&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To:
Street:		<input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
City/State: <b>Orville CA 95966</b>	Zip Code:	
Delivery/Special Instructions: <b>Chantelle McEvoy 209-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	418823-3-3 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-4 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-5 Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010	
1	418823-3-6 Customer PO: 3501176792 PO Ln: 3 418823-3525-I	1,010	
1	418823-3-7 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-8 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-9 Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010	
1	418823-3-3 Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837	

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SHIPPER/CONSIGNOR \_\_\_\_\_ DRIVER \_\_\_\_\_

SECTION 7 - NON-RE COURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SHIPPER/CONSIGNOR \_\_\_\_\_

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. **100,000.00**

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_

SHIPPER/CONSIGNOR \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman \_\_\_\_\_

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 20  
Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
of 27



## BILL OF LADING - Short Form. Not Negotiable

Name of Carrier: <b>Customer Pickup</b>	Carrier Number:	BOL No. <b>MSF-309181</b>
Carrier Code: <b>CPUX</b>	Pick Up Date and Time: <b>01/07/19 00:00</b>	Delv. Date and Time: <b>01/07/19 00:00</b>
TO Consignee: <b>PG&amp;E</b>	From Shipper: <b>Bossier City, LA 5031 Hazel Jones Road Bossier City, LA 71111</b>	Send All Freight Bills To: <input type="checkbox"/> Shipper <input checked="" type="checkbox"/> Consignee <input type="checkbox"/> Third Party
Street:		
City/State: <b>Orville CA 95965</b>	Zip Code:	
Delivery/Special Instructions: <b>Charlene McLeod 209-492-1669</b>		

Quantity	Kind of Package, Description of Articles, Special Marks and Exceptions	Weight	Miles
1	<del>418823-3-4 Customer PO: 3501176792 PU Lin: 3 418823-3526-B</del>	637	
1	<del>418823-3-7 Customer PO: 3501176792 PO Lin: 5 418823-3526-B</del>	837	

Please deliver to the following location:  
  
**2502 South Fifth Ave. Orville, CA 95965**

**1/2 Hour Advanced Notice by driver.**

DRIVER CERTIFICATION. Received, subject to negotiated rates and agreed-upon contract terms with Carrier or Broker. Receipt is acknowledged by Carrier of the property described above in apparent good order except as noted (contents and condition of packages unknown), marked, consigned and destined as indicated above, which Carrier agrees to carry to destination.

This is to certify that the materials/articles listed above are properly classified, described, packaged, marked, labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation.

SIGNATURES

SIGNATURE: \_\_\_\_\_ NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SECTION 7 - NON-REOURSE ON CONSIGNOR. If the shipment is to be delivered to the Consignee without recourse against the Consignor, the Consignor shall sign the following statement: The Carrier shall not make delivery of the shipment without either first establishing credit with the 'Consignee/Third party Bill to' depicted above, or without first receiving payment of freight and all other lawful charges.

SIGNATURE: \_\_\_\_\_ NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

Notify if problem arises in route or at delivery: Name Transportation Manager Telephone No. \_\_\_\_\_ After Hrs. No. 100,000.00

AMOUNT OF LIABILITY FOR FREIGHT LOSS/DAMAGE. The agreed or declared value of the property is specifically stated by the shipper to be \$ \_\_\_\_\_.

SIGNATURE: \_\_\_\_\_ NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

**PRE-SHIPPING INSPECTION.** I have secured and visually inspected the material on my truck and have found that all parts visible are not warped, bent, scraped, dented or damaged in any way. I have also witnessed the Sabre Communications Representative named below inspect the cargo for damages or shortages.

Signed \_\_\_\_\_ Truck Number \_\_\_\_\_  
Driver \_\_\_\_\_

Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Name of Trucking Company \_\_\_\_\_

Sabre Representative \_\_\_\_\_

**POST-SHIPPING INSPECTION.** I have visually inspected the material on this truck prior to their removal and have found that they are not warped, bent, scraped, dented or damaged in any way beyond the form, fit or function of the project.

Signed \_\_\_\_\_ Company \_\_\_\_\_  
Crew Foreman \_\_\_\_\_

Case: 19-30088 Doc# 476-2 Filed: 02/19/19 Entered: 02/19/19 10:34:00 Page 21  
Witnessed \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_  
Driver \_\_\_\_\_  
of 27

"THE NEW"

**SABRE-FWT**

JOB# 418823  
BOL# 309181

SABRE-FWT CORPORATION'S FREIGHT IS VERY TIME SENSITIVE

1. I UNDERSTAND THE HOURS NEEDED TO REACH THE DESTINATION AND I HAVE THE AVAILABLE DRIVING HOURS NEEDED TO COMPLETE THE DELIVERY IN A TIMELY MANNER.
2. I CAN COVER THE MILES NEEDED TO DRIVE AND BE ON TIME PER APPT DAY AND TIME, (LISTED ON BILL OF LADING) AND DELIVER ON TIME ACCORDING TO ACTUAL LOAD TIME LEAVING SABRE FACILITIES.
3. IN THE EVENT OF ANY SITUATION OR CIRCUMSTANCE WHICH MIGHT CAUSE DELAY IN DELIVERY, I AGREE TO GIVE A 24-48 HOUR NOTICE, OR AS MUCH NOTICE AS POSSIBLE, OF SUCH POSSIBLE DELAY TO SABRE-FWT COMMUNICATIONS CORPORATION BY CALLING SABRE AT 866-254-3707 AND INFORM SABRE OF THE DELAY.

DRIVER(S) PLEASE GO OVER ITEMS LISTED ABOVE AND VERIFY ALL ARE IN ORDER TO MAKE SURE YOU UNDERSTAND LOAD SEVERITY AND YOU CAN DELIVER LOAD ON TIME. IF ANSWER IS (NO) TO ANY OF THE ABOVE YOU NEED TO CALL YOUR DISPATCH PRIOR TO LOADING AND/OR MOVING THE LOAD.

IF YOU DO NOT NOTIFY AND/OR DO NOT MAKE ON TIME DELIVERY DUE TO DRIVER NEGLIGENCE, DAMAGES LISTED BELOW COULD BE APPLIED AND CHARGES/DETENTION WILL BE ASSESSED TO YOUR COMPANY.

1. BACK CHARGES FOR CRANE DOWNTIME.
2. BACK CHARGES FOR CREW DOWNTIME.

ARRIER(S) NOT LIABLE FOR DELAY WHEN SUCH DELAY IS CAUSED BY ACT OF GOD, WORK STOPPAGE, IMPASSABLE HIGHWAYS, BRIDGES, WAR, REBELLION, RIOT OR THE ACT OF PUBLIC AUTHORITY.

SAFE REQUIREMENTS

signing this document the driver verifies they have all the personal protective equipment (PPE) required (i.e. hard hat, ANSI-approved safety glasses/prescription safety glasses with side shields, high-visibility reflective vest, work gloves appropriate for the potential hazards {Jersey gloves are not permitted to be worn as the only means of protection}, and protective toe footwear that meet the safety-toe specifications as ASTM F2413-05 with compression rating of C75). When required hearing protection devices and Fire Retardant clothing.

DRIVER SIGNATURE: 



## Miscellaneous Shipment Authorization

Pack ID 309181	Customer PG&E	Site State CA	Site Name PO 3501176792 WPES
	Requested By cgarcia	Site Country	
Ship Date 1/4/2019	Arrive Date/Time 01/07/2019 12:00 AM	Model	Height 0.00
Shipment Type 4. CPU	Material To Ship Utility	Est Truck Loads	Ship From Bossier City
Cosignee PG&E	Contact Name\Phone\Cell Charlene McLoed 209-492-1669	Ship Address	Oroville, CA 95965

**Directions**

SO# 418823, PG&amp;E, PO# 3501176792

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

Line	Qty	Part Number	Description	Weight
Order Number: 418823				
2	1	418823-3508-T		1,025.00
3	1	418823-3508-T		1,025.00
4	1	418823-3508-T		1,025.00
5	1	418823-3525-T		1,010.00
6	1	418823-3525-T		1,010.00
7	1	418823-3508-T		1,025.00
8	1	418823-3508-T		1,010.00
9	1	418823-3525-T		1,025.00
10	1	418823-3508-T		1,010.00
11	1	418823-3525-T		1,010.00
12	1	418823-3525-T		1,025.00
13	1	418823-3508-T		1,010.00
14	1	418823-3525-T		1,025.00
15	1	418823-3508-T		1,010.00
16	1	418823-3525-T		1,025.00
17	1	418823-3508-T		1,010.00
18	1	418823-3525-T		1,141.00
19	1	418823-3510-T		1,010.00
20	1	418823-3525-T		1,010.00
21	1	418823-3525-T		837.00
22	1	418823-3526-B		837.00
23	1	418823-3526-B		824.00
24	1	418823-3509-B		837.00
25	1	418823-3526-B		837.00

Approved By: cgarcia

Total Weight: 23,801.00

Customer Pickup MSE-309181  
CPUX 01/04/19 01/07/19 00:00  
PG&E Bossier City, LA X  
5031 Hazel Jones Road  
Bossier City, LA 71111

Oroville CA 95965

Charlene McLoed  
209-492-1669

418823 Load#: 0	23,801	0
0		
1 418823-1-1	Customer PO: 3501176792 PO Ln: 2 Class-C1 - 65' [11.5' embed]-M350087 418823-3508-T	1,025
1 418823-1-2	Customer PO: 3501176792 PO Ln: 2 418823-3508-T	1,025
1 418823-1-3	Customer PO: 3501176792 PO Ln: 2 418823-3508-T	1,025
1 418823-1-4	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1 418823-1-5	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1 418823-1-6	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025

100,000.00

Customer Pickup MSE-309181  
CPUX 01/04/19 01/07/19 00:00  
PG&E Bossier City, LA X  
5031 Hazel Jones Road  
Bossier City, LA 71111

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-1-7	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-8	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-9	Customer PO: 3501176792 PO Ln: 4 418823-3508-T	1,025
1	418823-1-5	Customer PO: 3501176792 PO Ln: 4 418823-3509-B	824
1	418823-2-1	Customer PO: 3501176792 PO Ln: 1 418823-3510-T	1,141
1	418823-3-1	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-10	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-2	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010

100,000.00

Customer Pickup

MSE-309181

CPUX

01/04/19

01/07/19 00:00

PG&E

Bossier City, LA  
5031 Hazel Jones Road  
Bossier City, LA 71111

X

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-3-3	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-4	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-5	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-6	Customer PO: 3501176792 PO Ln: 3 418823-3525-T	1,010
1	418823-3-7	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-8	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-9	Customer PO: 3501176792 PO Ln: 5 418823-3525-T	1,010
1	418823-3-3	Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837

100,000.00

Customer Pickup MSE-309181  
CPUX 01/04/19 01/07/19 00:00  
PG&E Bossier City, LA X  
5031 Hazel Jones Road  
Bossier City, LA 71111

Oroville CA 95965

Charlene McLoed  
209-492-1669

1	418823-3-4	Customer PO: 3501176792 PO Ln: 3 418823-3526-B	837
1	418823-3-7	Customer PO: 3501176792 PO Ln: 5 418823-3526-B	837

Please deliver to the following location:

2592 South 5th Ave. Oroville, CA 95965

72 Hour Advanced Notice by driver.

100,000.00